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PTO/SB/22 (12-04)
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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

**PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)
FY 2005**

(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)

Docket Number (Optional)
209409/2023F

Application Number 10/661,798

Filed September 12, 2003

For **SCREENING METHODS FOR IDENTIFYING COMPOUNDS WHICH DECREASE HIV ENTRY INTO A CELL**

Art Unit 1646

Examiner Li, R.

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):

	<u>Fee</u>	<u>Small Entity Fee</u>	
<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$120	\$60	\$
<input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$450	\$225	\$ 225.00
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1020	\$510	\$
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1590	\$795	\$
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	\$

☒ Applicant claims small entity status. See 37 CFR 1.27.

☐ A check in the amount of the fee is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

☐ The Director has already been authorized to charge fees in this application to a Deposit Account.

☒ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to

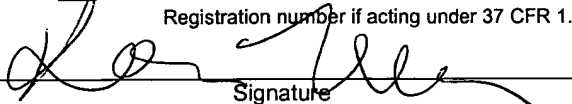
Deposit Account Number 16-0085
Client/matter 209409/2023F . I have enclosed a duplicate copy of this sheet.

I am the ☐ applicant/inventor.

☐ assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

☒ attorney or agent of record. Registration Number 34,380

☐ attorney or agent under 37 CFR 1.34.
Registration number if acting under 37 CFR 1.34


Signature

July 13, 2006
Date

Kathleen M. Williams
Typed or printed name

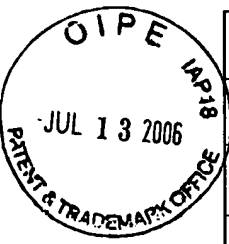
617.239.0451
Telephone Number

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of 1 forms are submitted.

BOS111_1204525.1

07/18/2006 RHEBRAHT 00000072 160085 10661798
01 FC:2252 225.00 DA



AMENDMENT TRANSMITTAL LETTER				Docket No. 209409/2023F																																											
Application No. 10/661,798		Filing Date September 12, 2003		Examiner Li, R.																																											
				Art Unit 1646																																											
Applicant(s): Samson, et al.																																															
Invention: SCREENING METHODS FOR IDENTIFYING COMPOUNDS WHICH DECREASE HIV ENTRY INTO A CELL																																															
<p align="center">TO THE COMMISSIONER FOR PATENTS</p> <p>Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.</p>																																															
<table border="1"><thead><tr><th colspan="6">CLAIMS AS AMENDED</th></tr><tr><th></th><th>Claims Remaining After Amendment</th><th>Highest Number Previously Paid</th><th>Number Extra Claims Present</th><th>Rate</th><th></th></tr></thead><tbody><tr><td>Total Claims</td><td>15</td><td>- 20 =</td><td>0</td><td>x 25.00</td><td>0</td></tr><tr><td>Independent Claims</td><td>3</td><td>- 3 =</td><td>0</td><td>x 100.00</td><td>0</td></tr><tr><td colspan="5">Multiple Dependent Claims (check if applicable) <input type="checkbox"/></td><td></td></tr><tr><td colspan="5">Other fee (please specify): Petition for two (2) month extension of time</td><td>225.00</td></tr><tr><td colspan="5">TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</td><td>225.00</td></tr></tbody></table>						CLAIMS AS AMENDED							Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate		Total Claims	15	- 20 =	0	x 25.00	0	Independent Claims	3	- 3 =	0	x 100.00	0	Multiple Dependent Claims (check if applicable) <input type="checkbox"/>						Other fee (please specify): Petition for two (2) month extension of time					225.00	TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:					225.00
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Other fee (please specify): Petition for two (2) month extension of time					225.00																																										
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:					225.00																																										
<input type="checkbox"/> Large Entity <input checked="" type="checkbox"/> Small Entity																																															
<input checked="" type="checkbox"/> No additional fee is required for this amendment.																																															
<input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of \$ _____. A duplicate copy of this sheet is enclosed.																																															
<input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed.																																															
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.																																															
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. _____ as described below. A duplicate copy of this sheet is enclosed.																																															
<div>16-0085 Client/matter 209409/2023F</div>																																															
<input checked="" type="checkbox"/> Credit any overpayment.																																															
<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.																																															
 Kathleen M. Williams Reg. No.: 34,380				Dated: July 13, 2006																																											